



GENERAL RESERVATION REQUEST FORM



A. Applicant Information

Organization Name: _____

Applicant Name: _____ Applicant Date of Birth (M/D/Y): _____

Applicant/Organization Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

B. Event Information

Event Name: _____ Sport: _____

Estimated Number of Attendees: _____ Age Group: _____ Purpose: _____

C. Reservation Specifics

If you have weekday and weekend request with different start / finish times, use separate lines below.

Field Type	Dimensions Needed	# of Fields	Day(s) of Week	Start Date	End Date	Start Time	End Time	Lights	Field Prep
								<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>

Comments:

I have read and understand the Policies and Procedures governing the use of the Mecklenburg County Sportsplex and agree on behalf of my above-listed organization to indemnify and hold the County, its agents, and employees harmless from and against any and all costs, expenses, liabilities, losses, damages, or injunctions. I also understand the submission of this application is NOT a guarantee of event approval.

Sign Name: _____

Date: _____

Credit Card Authorization Statement

I understand that Mecklenburg County Park and Recreation Department has the ability to retain my credit card (s) information on file and charge payments to my card (s) for athletic facility reservations.

I hereby authorize Mecklenburg County to charge my credit card (s) for an athletic facility rental payment (s) when due and provide me a receipt for all charges.

Print Name: _____

Sign Name: _____

Date: _____